

Work Order ID 87930

87930

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Wednesday, July 25, 2012 1:03:13 PM

Item ID: D350-636-043

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Item Name: Wearshoe

Stop ***NS2***

Start Date: 7/18/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 7/19/2012 Req'd Qty: 1.00

1

Customer: CU-DAR001

Reference: RMA RA111361 - RETURN

Approvals: Process Plan: MF

Date: 12-07-25 Tooling:

Date:

Run Start ***NR1***

QC: _____

Date: _____ SPC (Y/N): _____

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
N/A	Rev F

100 0.00

100

QC

Memo

0.00

Quality Control

INSPECT RA 111361 D350-636-043 X 1 B 83792

KIT IS COMPLET

ADD PAPERWORK AND NEW LABELS

CHG001

12/7/2012

110

Identify as per dwg & Stock Location: 61

0.00

110

Packaging

Memo

0.00

Packaging

12/7/30

120

QC21- Final Inspection - Work Order Release

0.00

120

QC

Memo

0.00

Quality Control

CHG001

12/7/31

MLJ 12/07/30

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

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Work Order ID: 87930

Parent Item: D350-636-043

Parent Item Name: Wearshoe

Start Date: 7/18/2012

Required Date: 7/19/2012

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A New Issue 07-12-17 DD
DD verf:EC

IPP Rev:B 10.05.20 added QC4

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D350-636-043 Wearshoe		Manufactured	No				Each	2.0000		1			

Location

Loc Qty

Loc Code

FG061

2

73656

1

81402

1

1 X 83792 MF 12-07-25

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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RA111361 D350-636-043

B83792

Received @ Dart June 19th, 2012
Inspected @ Dart July 6th, 2012

Customer: 455-702 BC LIMITED
Customer Contact: SEAN SMYTH
Shipped from: FANNY BAY BC CANADA

Instructions for RA 111361 D350-636-043 B83792 CHG001

- Kit complete
- Needs new PAPER WORK & LABELS
- Needs new BATCH #

Time Estimate = 1 HOUR ONLY (stores)

Departments Required: Stores (restocking)

Pictures Attached = NO

**THIS INSTRUCTION SHEET MUST
BE ATTACHED TO THE
RESTOCKING WORK ORDER AT
ALL TIMES!!!!**